

INSTRUCTIONS

You have been identified as a Past Performance Reference for the contractor indicated in Block 1 below. This contractor is proposing on a U.S. Patent and Trademark Office (USPTO) acquisition for Enterprise Contact Center (ECC) System Services. We value your input and appreciate greatly your willingness to thoughtfully complete this questionnaire.

Block 1. Contractor Name:

Please complete the following steps (1) Fully complete the questionnaire and complete the signature page on page 4 and (2) Either fax to Chris Hannah (Contracting Officer) at 571-273-6555 or scan and email to Chris.Hannah@uspto.gov by the closing date of the RFQ. If you have questions, please contact Chris Hannah, at 571-272-6555.

Please use the supplemental information section at the end of the questionnaire to expand on your ratings, making sure to identify your comments with the appropriate question number. You may expand on and more fully discuss any of the questions. Use extra pages as necessary. Negative responses may be referred to the contractor to permit rebuttal. Neither your name nor position within your organization will be divulged either during or after this survey has been completed.

Contract Information

Name of Contractor: _____

Program Title: _____

Contract Number: _____

Contract Award Date: _____

Contract Completion Date: _____

Period of Performance: _____

Type of Contract: _____

Total Maximum Dollar Value of Contract: _____

(Total maximum dollar value means total maximum value for basic plus all options of the contract)

Total amount of funds obligated to the contract to date: _____

DESCRIPTION OF MAIN ELEMENTS OF WORK PERFORMED UNDER THE CONTRACT

[illegible]

The following are the definitions for the rating system being used:

- 4 - Outstanding** – No issues/minor issues encountered with the contractor. Contractor exceeded expectations in fulfilling the requirements of the contract.

- 3 - Above Average** – Contractor met expectations in fulfilling the requirements of the contract. Any issues encountered with Contractor did not impact achievement of requirements.

- 2 - Average** – Issues encountered with Contractor required Agency resources to ensure achievement of requirements.

- 1 - Unacceptable** – Issues encountered with Contractor compromised the achievement of requirements.

QUESTIONNAIRE
(Please check the appropriate box for each rating factor)

QUALITY:	N/A	1	2	3	4
Compliance with contract requirements, accuracy, expertise of proposed personnel, quality of submitted deliverables					
CUSTOMER SERVICE:	N/A	1	2	3	4
Satisfaction of end users, team approach with customer, positive customer feedback, courteous interactions					
TIMELINESS OF PERFORMANCE:	N/A	1	2	3	4
Reliable, responsive, timely, no penalties or liquidated damages assessed					
COST:	N/A	1	2	3	4
Accurate cost estimating, work performed within contractor's proposed amount					
BUSINESS RELATIONS:	N/A	1	2	3	4
Effective Management, proactive in terms of solving problems, effective solutions					
OVERALL EVALUATION:	N/A	1	2	3	4
How would you rate the contractor's overall performance?					

WOULD YOU AWARD ANOTHER CONTRACT TO THIS VENDOR/CONTRACTOR?

YES _____ OR NO _____

INDICATE REASONS FOR YOUR RESPONSE (additional comments may be attached)

SUPPLEMENTAL INFORMATION

SIGNATURE PAGE

CUSTOMER ORGANIZATION
NAME AND ADDRESS

Evaluator's Printed Name

Title/Role (e.g., Program Manager, Contracting Officer)

Evaluator's Signature

Date

Phone

Please note the following regarding the confidentiality of your assessment:

By law, the Government will not disclose the names of individuals providing reference information during discussions with the contractor identified in Block 1 below.